

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

Date Received  
 Official Use Only  
 FAIR POLITICAL  
 PRACTICES COMMISSION  
 2011 MAR 21 AM 8:31

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Hunt		Melissa	Lynn

**1. Office, Agency, or Court**

Agency Name  
 City of Anderson  
 Division, Board, Department, District, if applicable  
 City Council  
 Your Position  
 Vice Mayor, Council Member

► If filing for multiple positions, list below or on an attachment:

Agency: See attached Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

<input type="checkbox"/> State	<input type="checkbox"/> Judge (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input checked="" type="checkbox"/> County of <u>Shasta</u>
<input checked="" type="checkbox"/> City of <u>Anderson</u>	<input type="checkbox"/> Other _____

**3. Type of Statement (Check at least one box)**

<input checked="" type="checkbox"/> <b>Annual:</b> The period covered is January 1, 2010, through December 31, 2010. -or- The period covered is ____/____/____, through December 31, 2010.	<input type="checkbox"/> <b>Leaving Office:</b> Date Left ____/____/____ (Check one) <input type="radio"/> The period covered is January 1, 2010, through the date of leaving office. <input type="radio"/> The period covered is ____/____/____, through the date of leaving office.
<input type="checkbox"/> <b>Assuming Office:</b> Date ____/____/____	
<input type="checkbox"/> <b>Candidate:</b> Election Year _____ Office sought, if different than Part 1: _____	

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

<input type="checkbox"/> <b>Schedule A-1 - Investments</b> – schedule attached	<input type="checkbox"/> <b>Schedule C - Income, Loans, &amp; Business Positions</b> – schedule attached
<input type="checkbox"/> <b>Schedule A-2 - Investments</b> – schedule attached	<input checked="" type="checkbox"/> <b>Schedule D - Income – Gifts</b> – schedule attached
<input type="checkbox"/> <b>Schedule B - Real Property</b> – schedule attached	<input type="checkbox"/> <b>Schedule E - Income – Gifts – Travel Payments</b> – schedule attached

-or-

☐ **None - No reportable interests on any schedule**

I certify under penalty of perjury under the laws of the State of California that

Date Signed 3-13-11  
 (month day year)

Signature

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Melissa Lynn Hunt
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► NAME OF SOURCE  
League of California Cities

ADDRESS (Business Address Acceptable)  
1400 K Street, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Community Services Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 22 / 10	\$ 35.00	Lunch-Sacramento
04 / 09 / 10	\$ 35.00	Lunch-Ontario
06 / 18 / 10	\$ 35.00	Lunch-Sacramento

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: \_\_\_\_\_

\_\_\_\_\_

Melissa Lynn Hunt  
Form 700 – 2010

Redding Area Bus Authority – Alternate Member  
Anderson Redevelopment Agency – Member  
Finance Audit Committee – Member